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ABSTRACT

This paper describes an ongoing national survey to provide baseline data on mental health services delivered in public elementary, middle, and secondary schools. The survey will: (1) identify and describe models and arrangements for the delivery of mental health services and document which models are most prevalent; (2) identify and describe the numbers and types of mental health staff available in public schools, amounts of time they are available, their qualifications, and ways they allocate their time; (3) document the types of mental health problems most frequently encountered in the school setting and the mental health services delivered; and (4) identify and categorize how school mental health services are currently funded and how various funding mechanisms affect the delivery of services. Two survey instruments have been developed: one for use at the individual school level and one for use at the district level. The study will survey 2000 schools. Discussion focuses on the narrow definition of "mental health services" used by the study as well as the limited definition of mental health staff (which excludes special education teachers). (DB)

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March 2002

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# Characteristics and Funding of School Mental Health Services: A National Survey

Judith L. Teich
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## Introduction

In order to address the widely-perceived need for current information on the status of school mental health services, the Center for Mental Health Services (CMHS) of the Substance Abuse and Mental Health Services Administration (SAMHSA) has contracted with Abt Associates, Inc., of Washington, DC and Cambridge, MA, to conduct a national survey that will provide a baseline of mental health services delivered in public elementary, middle, and secondary schools across the U.S. The survey will:

- Identify and describe models and arrangements for the delivery of mental health services within public elementary, middle, and secondary schools, and document which models and arrangements are most prevalent;
- Identify and describe the numbers and types of professional mental health staff available in public elementary, middle, and secondary schools, amounts of time they are typically available, their qualifications, and ways in which they generally allocate their time;
- Document the types of mental health problems/diagnoses most frequently encountered in the school setting, and the nature and amount of mental health services delivered in public schools;
- Identify and categorize the ways in which school mental health services are currently funded, and explore the ways in which various funding mechanisms may affect the delivery of services.

## Method

The project began in August, 2001, and is scheduled for completion in August 2003. The first few months were devoted to conducting a comprehensive review of the literature, developing a conceptual framework for the study, and refining the research questions. An expert advisory panel—consisting of representatives from the school, mental health researchers, mental health providers, and education communities—was convened in December 2001. The panel will continue to provide guidance on the overall design and conduct of the survey.

Two draft survey instruments have been developed. The first instrument gathers data on numbers and types of mental health personnel, their activities, and the types of mental health services delivered within a specific school. The second instrument is for completion by personnel at the district level, and gathers information related to administrative arrangements and funding sources. Several site visits have been conducted for the purpose of pilot testing these survey instruments. At the time of this presentation, approval for the survey design and the draft instruments was being sought from the U.S. Office of Management and Budget.

The survey instruments are intended to address the following research questions:

- What are the basic systems for delivery of mental health services in the nation's schools in terms of sponsorship, staffing, array of services, school versus district control, and linkages with the community?
- What is the size and composition of the staff providing mental health services in schools? What types of professionals and para-professionals provide services? How are various staff configured in schools? What are the qualifications of the various staff?
- What types of mental health problems are presented or encountered in the nation's schools? What is the nature and range of mental health services that are provided to students in the schools?
- What are the various sources of funding for school mental health services? Which are the most common? What are the issues schools face in using various sources of funding, particularly related to funding mandates and restrictions? How do these issues affect delivery and coordination of mental health services within schools and between schools and communities?



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### Response Universe and Sampling Method

The unit of sampling, analysis, and reporting for this survey is public schools, grades 1-12. The universe for this survey consists of all regular public schools (elementary, middle, secondary, and combined schools), with any of grades 1-12, in the United States. The selection of regular schools denotes the exclusion of special education, charter, vocational/technical, and alternative schools. The selection of schools with any of grades 1 through 12 does not preclude schools with kindergartens, but it does prevent selection of schools that have kindergarten as the only grade.

The sampling unit for this survey is schools, as opposed to school districts. Therefore, schools will be sampled first, and then the school districts corresponding to the sampled schools will be included in the survey to answer questions about the funding of mental health services. Districts are not the unit of analysis in this survey, and are included only because they are the best source of information on funding. The data from each district will be attached to the corresponding school or schools, assigned the school's sampling weight, and reported at the school level. Sampling schools first is the most efficient sampling design to generate estimates of characteristics of schools nationally. The project goal for response rates is 80% for both school and district surveys.

The strata for the selection of the sample schools are created by the cross-classification of the different categories of two variables, school level and school size. School level is categorized as elementary, middle, secondary, and combined; and school size as small (from 1 to 250 students), medium (251 to 500 students), large (501 to 1000 students), and very large (1001 and more students).

We will draw a sample of 2,000 schools and, with an 80% response, will have 1,600 completed school surveys. The overall sample of 2,000 schools (1,600 complete surveys) are allocated to each size group in proportion to the square root of the total number of students in each size group. We considered several allocations. If we allocate the overall number of schools in the sample to each size group in proportion to the number of schools, we get a very large number of small schools in the sample and not enough large schools. Similarly, if we allocate the sample of schools in proportion to the number of students in each size group, we get a small number of schools in the first size group. As a compromise we adopted the square root allocation, which gives a moderate sample size from each size group. The sample in each size group was then allocated to each school level in proportion to the number of schools in the population belonging to that level.

## Discussion

This survey is a first attempt to gather comprehensive, national level data on the mental health services provided in public schools; these data have never before been available. Since it is an initial effort, we have had to make a number of difficult decisions in order to simplify the process and, hopefully, enhance the probability of its success.

First, we have intentionally defined "mental health services" in a narrow way. Specifically, we have included traditional mental health services that are delivered to students who have been identified as having problems with emotional, behavioral, and/or social functioning. This means that, for purposes of the current survey, prevention activities (such as Drug Abuse Resistant Education; DARE), which are targeted to all students in a school, or all students in a particular grade or classroom, are *not* included.

Second, consistent with this definition, we are collecting information on the activities of only those personnel who we have specified, using a traditional definition of mental health staff: psychologists, social workers, psychiatrists, nurses, and counselors. Classroom teachers—even those who provide specialized instruction to students with emotional and behavioral problems—would not be included as mental health personnel under this definition.



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We recognize that, as the issue of behavioral health in schools has gained increasing prominence in the past several years, schools across the country have implemented many innovative and creative programs to address the emotional and behavioral health needs of their students. However, for the reasons outlined above, many of those programs are beyond the scope of the present survey. By setting realistic limits on the information that we collect in this initial effort, we hope to capture and disseminate meaningful data that will provide a solid foundation for future surveys on other aspects of this important topic.

It is anticipated that the survey instruments will be mailed to schools and districts in November, 2002, and that data collection, including telephone follow up, will be completed by February, 2003. The final report, consisting of an analysis of survey results, findings, and implications, will be available in Fall 2003.

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